County: Waukesha RIVER HILLS WEST HEALTH CARE CENTER 321 RIVERSIDE DRIVE PEWAUKEE 53072 Phone: (262) 691-2300
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 204
Total Licensed Bed Capacity (12/31/00): 237
Number of Residents on 12/31/00: 158 Ownership: Highest Level License: Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Average Daily Census: Corporati on Skilled No Yes 161

Number of Residents on 12/31/00: ***********************************	****	15 8 *************	*****	******	********	*********	******
Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	31/00)	Length of Stay (12/31/0)0)
Home Health Care Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals Transportation Referral Service Other Services Provide Day Programming for Mentally Ill Provide Day Programming for Developmentally Disabled	No N	Primary Diagnosis Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular Cerebrovascular Diabetes Respiratory Other Medical Conditions	% 0. 0 20. 9 4. 4 0. 6 2. 5 1. 3 6. 3 12. 7 3. 2 4. 4 7. 6 36. 1	Age Groups Under 65 65 - 74 75 - 84 85 - 94 95 & Over 65 & Over Sex Male Female	8. 9 8. 9 31. 0 38. 0 13. 3 100. 0 91. 1	Less Than 1 Year 1 - 4 Years More Than 4 Years ****************************** Full-Time Equival Nursing Staff per 100 (12/31/00) RNs LPNs Nursing Assistants Aides & Orderlies	25. 9 40. 5 33. 5 100. 0
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Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			Other Private			Pay		Manage	ed Care	Percent		
			Per Die	em		Per Diem			Per Diem		Per Diem		1		Per Diem	Total	Of All
Level of Care	No.	%	Rate	No	. %	Rate	No	. %	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	2	1. 7	\$110. 25	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	2	1. 3%
Skilled Care	7	100. 0	\$314. 10	107	88. 4	\$93. 50	13	100. 0	\$93. 50	13		\$155.00	4			144	91. 1%
Intermediate				12	9. 9	\$76. 74	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	12	7. 6%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0%
Ventilator-Dependen	ıt O	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	7	100. 0		121	100. 0		13	100.0		13	100.0		4	100.0		158	100. 0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needi ng Total Assi stance of Percent Admissions from: Activities of % Totally Number of Private Home/No Home Health 12.7 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 3. 9 Bathi ng 4.4 64.6 31.0 158 Other Nursing Homes 7.8 Dressi ng 19.0 44. 9 36. 1 158 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals 70.6 Transferring 39. 2 44.9 15.8 158 26.6 0.0 Toilet Use 51.3 22. 2 158 0.0 Eati ng 55. 7 31.6 12. 7 158 ***** Other Locations 4.9 Total Number of Admissions 102 Continence Special Treatments Receiving Respiratory Care Receiving Tracheostomy Care Receiving Suctioning Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 1. 9 6. 3 Private Home/No Home Health 5. 6 Occ/Freq. Incontinent of Bladder 52.5 0.0 Private Home/With Home Health Occ/Freq. Incontinent of Bowel 34. 2 0.0 15. 1 Other Nursing Homes 6. 3 1. 9 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 21.4 Mobility 2. 5 Physically Restrained 3.8 0.0 39. 2 0.0 Other Locations 7. 1 Skin Care Other Resident Characteristics 1. 9 Deaths 44.4 With Pressure Sores Have Advance Directives 98.7 Total Number of Discharges With Rashes 0.0 Medi cati ons (Including Deaths) 126 Receiving Psychoactive Drugs 46. 8

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

		Own	ershi p:	Bed	Si ze:	Li ce	ensure:		
	Thi s	Pro	Propri etary		00 +	Ski l	led	All Facilities	
	Facility	Peer [']	Group	Peer	Group	Peer Group			
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	67. 9	74 . 6	0. 91	80. 3	0. 85	81. 9	0.83	84. 5	0.80
Current Residents from In-County	65. 8	84. 4	0. 78	84. 7	0. 78	85. 6	0. 77	77. 5	0.85
Admissions from In-County, Still Residing	29. 4	20. 4	1. 45	28. 9	1.02	23. 4	1. 26	21. 5	1. 37
Admi ssi ons/Average Daily Census	63. 4	164. 5	0. 39	96. 3	0. 66	138. 2	0.46	124. 3	0. 51
Discharges/Average Daily Census	78. 3	165. 9	0. 47	100. 6	0. 78	139. 8	0. 56	126. 1	0.62
Discharges To Private Residence/Average Daily Census	16. 1	62. 0	0. 26	26. 4	0. 61	48. 1	0. 34	49. 9	0. 32
Residents Receiving Skilled Care	92. 4	89. 8	1.03	88. 4	1.05	89. 7	1.03	83. 3	1. 11
Residents Aged 65 and Older	91. 1	87. 9	1. 04	90. 4	1. 01	92. 1	0. 99	87. 7	1.04
Title 19 (Medicaid) Funded Residents	76. 6	71. 9	1. 07	73. 5	1.04	65. 5	1. 17	69. 0	1. 11
Private Pay Funded Residents	8. 2	15. 0	0. 55	18. 7	0.44	24. 5	0. 34	22. 6	0. 36
Developmentally Disabled Residents	0. 0	1. 3	0.00	1. 2	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Résidents	25. 3	31. 7	0.80	33. 1	0.77	31. 5	0.80	33. 3	0. 76
General Medical Service Residents	36. 1	19. 7	1. 83	20. 6	1. 75	21.6	1. 67	18. 4	1.96
Impaired ADL (Mean)	47. 5	50. 9	0. 93	52. 0	0. 91	50. 5	0.94	49. 4	0. 96
Psychol ogi cal Problems	46. 8	52. 0	0. 90	49. 4	0. 95	49. 2	0. 95	50. 1	0.94
Nursing Care Required (Mean)	6. 5	7. 5	0. 86	6.8	0. 95	7. 0	0. 92	7. 2	0.91